

Child OC Impact Scale (COIS - P)

Parent Report about Child

Name: _____ Age: _____ Date: _____

Please rate how much your child's Obsessive Compulsive Disorder symptoms (unwanted thoughts and/or rituals) have caused problems for him or her in the following areas over the past month. If a specific question does not apply to your child, mark "Not at all".

In the past month, how much trouble has your child had doing the following things because of his or her OCD?	Not at all	Just a Little	Pretty Much	Very Much
1. Bathing or grooming (e.g., brushing teeth, fixing hair)	_____	_____	_____	_____
2. Being absent from school	_____	_____	_____	_____
3. Being prepared for class (e.g., having books, paper, or pencils ready)	_____	_____	_____	_____
4. Being with a group of people he/she knows	_____	_____	_____	_____
5. Being with a group of strangers	_____	_____	_____	_____
6. Completing assignments in class	_____	_____	_____	_____
7. Eating lunch with other kids	_____	_____	_____	_____
8. Eating meals at home	_____	_____	_____	_____
9. Getting along with his or her brothers or sisters	_____	_____	_____	_____
10. Getting along with his or her parents	_____	_____	_____	_____
11. Getting good grades	_____	_____	_____	_____
12. Getting ready for bed at night	_____	_____	_____	_____
13. Giving oral reports or reading out loud	_____	_____	_____	_____
14. Going to a friend's house during the day	_____	_____	_____	_____
15. Having a friend come to his or her house during the day	_____	_____	_____	_____
16. Keeping his or her current friends	_____	_____	_____	_____
17. Sleeping at night	_____	_____	_____	_____
18. Spending the night at a friend's house	_____	_____	_____	_____
19. Taking tests or exams	_____	_____	_____	_____
20. Using the bathroom	_____	_____	_____	_____
21. Overall, how much are your child's OCD symptoms ...	Not at all	Just a Little	Pretty Much	Very Much
a. causing problems for him/her at <u>school</u> ?	_____	_____	_____	_____
b. causing problems for him/her <u>socially</u> , that is with friends?	_____	_____	_____	_____
c. causing problems for him/her with <u>family or at home</u> ?	_____	_____	_____	_____